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U.S. Unlikely to Meet Target for TB Elimination

Survey says latent infections among immigrants, minorities, poor thwart reaching 2010 benchmark

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HealthDay

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SATURDAY, Feb. 2 (HealthDay News) -- It appears that the United States will fall far short of its benchmark goals toward eliminating tuberculosis, according to an analysis of National Health and Nutritional Examination Survey data.

Researchers found that the rate of latent TB infection (LTBI) in the U.S. population in 1999-2000 was 4.2 percent. This does not include homeless people or those in prison. The current infection rate would have to be 1 percent and decreasing for the United States to meet its goal of TB incidence of less than one per million by 2010.

"Persons with LTBI are not infectious and cannot transmit TB to others, and only 5 to 10 percent of individuals with LTBI will go on to develop active TB, which is infectious. But because the risk of progression to TB can be substantially reduced by preventive treatment, it is crucial that LTBI be detected and treated," said study author Dr. Diane Bennett, of the U.S. Centers for Disease Control and Prevention.

Of the 11.2 million people with LTBI in the country in 1999-2000, only one in four had been diagnosed, and only 13 percent had been prescribed treatment, the data analysis revealed.

"The LTBI rates among non-Hispanic whites, 1.9 percent, is close to that required for TB elimination, but the far higher rates among all other groups make U.S. TB elimination by 2010 unlikely," wrote Bennett and colleagues.

The LTBI rate among people living below the poverty level was 6.1 percent, compared with 3.3 percent for those living above the poverty level. The analysis also found that the TB infection rate among foreign-born people was 18.7 percent, compared to 1.8 percent among people born in the United States. Of those, 12 percent of the foreign-born and 16 percent of the U.S.-born had received treatment.

"The higher LTBI rates among some subgroups suggest that specific public health actions should be taken for and with immigrant communities, racial minorities and individuals living in poverty," Bennett said. "While LTBI is not infectious and latently affected individuals are not a threat to others, increased outreach for education, diagnosis and provision of appropriate preventive treatment could prevent many future cases of active TB."

The findings were published in the first issue for February of the *American Journal of Respiratory and Critical Care Medicine*.

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